



**Massachusetts Department of Environmental Protection**

Bureau of Waste Prevention – Air Quality

**BWP AQ 25 Emission Standards for Power Plants –  
Emission Control Plan (ECP)  
Instructions and Supporting Materials**

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**Introduction**

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at [www.state.ma.us/dep](http://www.state.ma.us/dep) in two file formats: Microsoft Word™ and Adobe Acrobat PDF™. Either format allows documents to be printed.

*Instructions & Support Materials* files in Microsoft Word™ format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

*Permit Applications* in Microsoft Word™ format must be downloaded separately. Users with Microsoft Word™ 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF™ format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF™ files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



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Permit Fact Sheet**

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**1. What is the purpose of this Emission Control Plan?**

The ECP is the instrument used by facilities to demonstrate to Department (DEP) and all interested parties, including the general public, how they are going to comply with specific emission standards in a regulation.

There will be an opportunity for public comment upon each ECP application. This process enhances environmental protection by allowing for comments from various interests, and incorporating relevant comments as well as the regulatory requirements into the final ECP Approval. The application material submitted to the DEP and the plan approval letter become the approved ECP.

**2. Who must apply?**

An ECP is required for affected facilities subject to 310 CMR 7.29. Affected facilities are those which emitted greater than 500 tons of SO<sub>2</sub> and 500 tons of NO<sub>x</sub> during calendar years 1997, 1998 or 1999 and include any unit which is a fossil fuel fired boiler or indirect heat exchanger that: (1) is regulated by 40 CFR Part 72 (Federal Acid Rain Program); (2) serves as a generator with a nameplate capacity of 100 MW or more; (3) was permitted prior to August 7, 1977; and (4) had not subsequently received a Plan Approval pursuant to 310 CMR 7.00: Appendix A or a permit pursuant to 40 CFR Part 52, Prevention of Significant Deterioration, prior to October 31, 1998.

**3. What other requirements should be considered when applying for this ECP?**

The future submittal of a 310 CMR 7.02 plan application may be necessary for some modifications that may be undertaken at affected facilities to comply with the emission standard requirements of 310 CMR 7.29. If a plan approval is required pursuant to 310 CMR 7.02, an administratively complete application must be submitted on or before January 1, 2003. The Department strongly recommends that facilities planning to make modifications which will require the submittal of a plan application pursuant to 310 CMR 7.02 to submit said applications as soon as possible.

**4. What are the application fees?**

There is no application fee for BWP AQ 25.

**5. What is the Primary Permit Location? What is the Reserve Copy Location?**

Primary Permit Location:

**Department of Environmental Protection**

**\* Regional Office**

**BWP Permitting Program, Air Quality Section**

\*See "Addresses and Phone Numbers" page included in this package.

Reserve Copy Locations:

**There are no Reserve Copy  
Locations for these permits.**

BWP AQ 25 permit applications should be submitted in duplicate to the DEP Regional Office responsible for the community in which the affected facility is located.

If approved, DEP stamps one copy and returns it to you along with the ECP Final Approval for your records. In this manner, DEP and the applicant have identical copies of the approved submittal and the Final ECP Approval. Supplemental forms may be required when completing the ECP. Supplemental forms BWP AQ SFC-1, BWP AQ SFC-3 and BWP AQ SFC-6 are included in this application kit.



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**6. What are the timelines?**

Because there is no fee associated with a BWP AQ 25, these applications are not subject to timelines.

**7. What is the annual compliance fee?**

The amount of the annual compliance assurance fee depends upon the facility's potential emissions. Please consult Table 4.03 (Air Quality Section) of 310 CMR 4.03 for more information. If you fail to pay the bill for your annual compliance assurance fee, your permit to operate could be suspended or revoked.

**8. How long is this permit in effect?**

The permit is in effect until the facility approved in this plan is substantially reconstructed or altered, at which time a new approval may be required.

**9. How can I avoid the most common mistakes made in applying for this permit?**

- a. Answer all questions on the application form and indicate "N/A" (not applicable) where appropriate.
- b. Be sure to have a legally responsible company official sign the application.
- c. Submit two copies of the application to the regional office (one of which must contain an original signature).
- d. Submit the BWP AQ 25 Form and a copy of the DEP transmittal Form to:

**Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211.**

**10. What are the regulations that apply to this permit? Where can I get copies?**

These regulations include, but are not limited to:

- a. Air Quality Control Regulations, 310 CMR 6.00 - 8.00.
- b. Administrative Penalty Regulations, 310 CMR 5.00.

These may be purchased at:

**State House Bookstore  
Room 116  
Boston, MA 02133**

**State House West Bookstore  
436 Dwight Street  
Springfield, MA 01103**



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Emission Control Plan For Owners or Operators Subject To Emission Standards for Power Plants Regulation Under 310 CMR 7.29.

**SECTION A – Facility Information**

1. Facility Information - Give the complete name and address of the facility.
2. Facility Contact Person - Indicate the person responsible for the day-to-day operations of the facility (plant manager for example).
3. Facility Owner - This can be a person or a corporation.
4. Compliance Contact – Company contact responsible for compliance with 310 CMR 7.29

**SECTION B – Facility Description**

Facility Description – A list of units at the affected facility that will be used to demonstrate compliance with 310 CMR 7.29(5), including which units will be included in calculating historical actual emissions.

**SECTION C – Description of Affected Facility Units:**

This section shall be completed for each unit.

1. Unit Designation - Indicate the designation of each unit (e.g. Unit 1 or Unit A)
2. Manufacturer - List the manufacturer of the unit.
3. Model Number - List the model number of the unit.
4. Maximum Continuous Rated Design Capacity - Indicate in parts a and b the fuel heat input and megawatt output, as applicable.
  - a. Fuel heat input (Million British Thermal Units per hour (MMBtu/hr))
  - b. Electrical output (Megawatts (MW))
5. Date of installation - Indicate the date of installation of the unit.

**SECTION D – Compliance Path**

Choose yes or no for the following questions:

1. Will this affected facility comply with the emission standards in 310 CMR 7.29(5) by repowering a unit subject to 40 CFR Part 72 at the affected facility?
2. Will any unit at this affected facility be required to receive a plan approval pursuant to 310 CMR 7.02 for construction, substantial reconstruction or alteration of a facility subject to 40 CFR Part 72 for the purpose of compliance with 310 CMR 7.29?

If yes, identify which units.

**Note:** 310 CMR 7.29(6)(a)1. requires affected facilities to submit an emission control plan (ECP) for Department approval on or before January 1, 2002, regardless of the compliance path chosen.

**SECTION E – Emissions Control for Nitrogen Oxides, Sulfur Dioxides, Particulate Matter, Mercury, Carbon Dioxide, and Carbon Monoxide (Complete Section E for each unit).**



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**SECTION F – Compliance Methods**

A description of how the facility will comply with the emission standards contained in 310 CMR 7.29(5) for:

1. NO<sub>x</sub>
2. SO<sub>2</sub>
3. CO<sub>2</sub> (e.g. sequestration, off-site reductions, on-site efficiency improvements)

This description should include a unit-by-unit description of actions to be taken for each pollutant.

**SECTION G – Optimization Section**

A description of how emission reduction measures implemented to achieve reductions in one pollutant will optimize reductions of other pollutants, for example mercury and CO<sub>2</sub>.

**SECTION H – Proposed Schedule**

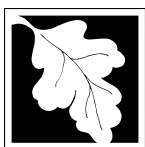
Submit a proposed schedule with interim milestones for each activity leading to compliance with the requirements in 310 CMR 7.29(5). Such information shall include, but not be limited to, sufficient information to allow DEP to consult with the Division of Energy Resources and the Department of Telecommunications and Energy, to address any concerns with potential impacts to the reliability of the New England power system.

**SECTION I – Signature of Facility Contact person Responsible for Compliance with 310 CMR 7.29.**

The signature of the facility contact person responsible for compliance with 310 CMR 7.29.

**Most DEP permit application packages  
are available from DEP's web site at  
<http://www.state.ma.us/dep>**

This information is available in alternative format upon request to DEP's ADA Coordinator, BAS/HR, 4th Floor.  
One Winter Street, Boston, MA 02108



## Massachusetts Department of Environmental Protection

# Addresses and Phone Numbers

DEP Boston  
One Winter Street  
Boston, MA 02108  
Telephone: (617) 292-5500  
Fax: (617) 556-1049  
TDD: (617) 574-6868

William X. Wall Experiment Station  
37 Shattuck Street  
Lawrence, MA 01843  
Fax: (978) 688-0352  
*Division of Environmental Analysis*  
Telephone: (978) 682-5237  
*Air Quality Surveillance*  
Telephone: (978) 975-1138

Office of Watershed  
Management  
627 Main Street  
Worcester, MA 01608  
Telephone: (508) 792-7470  
Fax: (508) 839-3469

Millbury Training Center  
Route 20 Millbury, MA 01527  
Telephone: (508) 368-5600  
Fax: (508) 755-9253  
*Residuals Sludge Management*  
Telephone: (508) 368-5606  
*WWT Operator Certification*  
Telephone: (508) 368-5698

DEP Western Region  
436 Dwight Street  
Suite 402  
Springfield, MA 01103  
Phone: (413) 784-1100  
Fax: (413) 784-1149



Adams  
Agawam  
Alford  
Amherst  
Ashfield  
Becket  
Belchertown  
Bernardston  
Blandford  
Brimfield  
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Cheshire  
Chester  
Chesterfield  
Chicopee  
Clarksburg

Colrain  
Conway  
Cummington  
Dalton  
Deerfield  
Easthampton  
East Longmeadow  
Egremont  
Erving  
Florida  
Gill  
Goshen  
Granby  
Granville  
Great Barrington  
Greenfield  
Hadley

Hampden  
Hancock  
Hatfield  
Hawley  
Heath  
Hinsdale  
Holland  
Holyoke  
Huntington  
Lanesborough  
Lee  
Lenox  
Leverett  
Leyden  
Longmeadow  
Ludlow  
Middlefield

Monroe  
Montague  
Monterey  
Montgomery  
Monson  
Mount Washington  
New Ashford  
New Marlborough  
New Salem  
North Adams  
Northampton  
Northfield  
Orange  
Otis  
Palmer  
Pelham  
Peru

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Plainfield  
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Savoy  
Sheffield  
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Stockbridge  
Sunderland  
Tolland

Tyringham  
Wales  
Ware  
Warwick  
Washington  
Wendell  
Westfield  
Westhampton  
West Springfield  
West Stockbridge  
Whately  
Wilbraham  
Williamsburg  
Williamstown  
Windsor  
Worthington

DEP Central Region  
627 Main Street  
Worcester, MA 01608  
Phone: (508) 792-7650  
Fax: (508) 792-7621  
TDD: (508) 767-2788



Acton  
Ashburnham  
Ashby  
Athol  
Auburn  
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Bellingham  
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Blackstone  
Bolton  
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Princeton  
Royalston

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Shirley  
Shrewsbury  
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Southbridge  
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Sturbridge  
Sutton  
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Townsend  
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Upton

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West Brookfield  
Westford  
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Worcester

DEP Southeast Region  
20 Riverside Drive  
Lakeville, MA 02347  
Phone: (508) 946-2700  
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TDD: (508) 946-2795



Abington  
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Brewster  
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Chilmark

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Dennis  
Dighton  
Duxbury  
Eastham  
East Bridgewater  
Easton  
Edgartown  
Fairhaven  
Fall River  
Falmouth  
Foxborough  
Franklin

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Westport  
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Yarmouth

DEP Northeast Region  
205 Lowell Street  
Wilmington, MA 01887  
Phone: (978) 661-7600  
Fax: (978) 661-7615  
TDD: (978) 661-7679



Amesbury  
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Chelmsford  
Chelsea  
Cohasset  
Concord  
Danvers  
Dedham  
Dover  
Dracut  
Essex  
Everett  
Framingham  
Georgetown  
Gloucester  
Groveland  
Hamilton  
Haverhill

Hingham  
Holbrook  
Hull  
Ipswich  
Lawrence  
Lexington  
Lincoln  
Lowell  
Lynn  
Lynnfield  
Malden  
Manchester - By-The-Sea  
Marblehead  
Medfield  
Medford  
Melrose

Merrimac  
Methuen  
Middleton  
Millis  
Milton  
Nahant  
Natick  
Needham  
Newbury  
Newburyport  
Newton  
Norfolk  
North Andover  
North Reading  
Norwood  
Peabody

Quincy  
Randolph  
Reading  
Revere  
Rockport  
Rowley  
Salem  
Salisbury  
Saugus  
Sherborn  
Somerville  
Stoneham  
Sudbury  
Swampscott  
Tewksbury  
Topsfield

Wakefield  
Walpole  
Waltham  
Watertown  
Wayland  
Wellesley  
Wenham  
West Newbury  
Weston  
Westwood  
Weymouth  
Wilmington  
Winchester  
Winthrop  
Woburn



Massachusetts Department of Environmental Protection  
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# BWP AQ 25

## Emission Standards for Power Plants – Emission Control Plan (ECP)

Transmittal Number \_\_\_\_\_

Facility ID# (if known) \_\_\_\_\_

### A. Facility Information

**Important:**

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Facility:

Facility Name \_\_\_\_\_

Street Address \_\_\_\_\_

City/Town \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Mailing Address(if different from above):

Street/PO Box \_\_\_\_\_

City/Town \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

2. Facility Contact Person:

Name \_\_\_\_\_

Title \_\_\_\_\_

Telephone Number \_\_\_\_\_

3. Facility Owner:

Owner or Corporation Name \_\_\_\_\_

Telephone Number \_\_\_\_\_

4. Compliance Contact:

Name \_\_\_\_\_

Title \_\_\_\_\_

Telephone Number \_\_\_\_\_

### B. Facility Description

List all units at the affected facility that will be used to demonstrate compliance with 310 CMR 7.29(5).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## Emission Standards for Power Plants – Emission Control Plan (ECP)

Transmittal Number \_\_\_\_\_

Facility ID# (if known) \_\_\_\_\_

### C. Affected Facility Unit (Complete Section C for each unit)

- |  |       |       |       |       |
|--|-------|-------|-------|-------|
| 1. Unit Number                               | _____ | _____ | _____ | _____ |
| 2. Manufacturer                              | _____ | _____ | _____ | _____ |
| 3. Model Number                              | _____ | _____ | _____ | _____ |
| 4. Maximum Continuous Rated Design Capacity: |       |       |       |       |
| a. Fuel heat Input                           | _____ | _____ | _____ | _____ |
| b. Electrical Output                         | _____ | _____ | _____ | _____ |
| 5. Date of Installation                      | _____ | _____ | _____ | _____ |

### D. Compliance Path

1. Will this affected facility comply with the emission standards in 310 CMR 7.29(5) by repowering a unit subject to 40 CFR Part 72 at the affected facility?
- ☐ Yes    ☐ No

2. Will any unit at this affected facility be required to receive a plan approval pursuant to 310 CMR 7.02 for construction, substantial reconstruction or alteration of a facility subject to 40 CFR Part 72 for the purpose of compliance with 310 CMR 7.29?
- ☐ Yes    ☐ No

If yes, identify which units.

### E. Emissions Control for Nitrogen Oxides, Sulfur Dioxides, Particulate Matter, Mercury, Carbon Dioxide, and Carbon Monoxide (Complete Section E for each unit)

For each unit, indicate Existing Controls (if none, check "None" ONLY):

- | Unit Number: | Existing Controls:   |                               |                               |
|--------------|--|-------------------------------|-------------------------------|
| _____        | <input type="checkbox"/> Electrostatic Precipitators (ESP) | <input type="checkbox"/> SNCR | <input type="checkbox"/> None |
| _____        | <input type="checkbox"/> Low NO <sub>x</sub> Burners       | <input type="checkbox"/> SCR  |                               |
| _____        | <input type="checkbox"/> Electrostatic Precipitators (ESP) | <input type="checkbox"/> SNCR | <input type="checkbox"/> None |
| _____        | <input type="checkbox"/> Low NO <sub>x</sub> Burners       | <input type="checkbox"/> SCR  |                               |
| _____        | <input type="checkbox"/> Electrostatic Precipitators (ESP) | <input type="checkbox"/> SNCR | <input type="checkbox"/> None |
| _____        | <input type="checkbox"/> Low NO <sub>x</sub> Burners       | <input type="checkbox"/> SCR  |                               |
| _____        | <input type="checkbox"/> Electrostatic Precipitators (ESP) | <input type="checkbox"/> SNCR | <input type="checkbox"/> None |
| _____        | <input type="checkbox"/> Low NO <sub>x</sub> Burners       | <input type="checkbox"/> SCR  |                               |





## BWP AQ 25

### Emission Standards for Power Plants – Emission Control Plan (ECP)

\_\_\_\_\_  
Transmittal Number

\_\_\_\_\_  
Facility ID# (if known)

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## F. Compliance Methods

A description of how the facility will comply with the emission standards contained in 310 CMR 7.29(5) for:

1. NO<sub>x</sub>

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2. SO<sub>2</sub>

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3. CO<sub>2</sub> (e.g. sequestration, off-site reductions, on-site efficiency improvements)

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## G. Optimization Section

A description of how emission reduction measures implemented to achieve reductions in one pollutant will optimize reductions of other pollutants, for example mercury and CO<sub>2</sub>.

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## H. Proposed Schedule

Submit a proposed schedule with interim milestones for each activity leading to compliance with the requirements in 310 CMR 7.29(5). Such information shall include, but not be limited to, sufficient information to allow DEP to consult with the Division of Energy Resources and the Department of Telecommunications and Energy, to address any concerns with potential impacts to the reliability of the New England power system.



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\_\_\_\_\_  
Transmittal Number

\_\_\_\_\_  
Facility ID# (if known)

**I. Signature of the Facility Contact Responsible for Compliance with  
310 CMR 7.29**

The signature below is required pursuant to 310 CMR 7.29(6)(b)5. Even if an agent has been designated to fill out this form, the responsible official must sign it.

I certify that I have examined the responses  
provided herein and that to the best of my  
knowledge they are true and complete.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Responsible Official

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
Representing

\_\_\_\_\_  
Date